

<i>SERFF Tracking Number:</i>	<i>REGU-125359796</i>	<i>State:</i>	<i>Arkansas</i>
<i>Filing Company:</i>	<i>Axis Insurance Company</i>	<i>State Tracking Number:</i>	<i>EFT \$50</i>
<i>Company Tracking Number:</i>	<i>AIC-AR-FIS-07 CR</i>		
<i>TOI:</i>	<i>26.0 Burglary & Theft</i>	<i>Sub-TOI:</i>	<i>26.0001 Commercial Burglary & Theft</i>
<i>Product Name:</i>	<i>Axis FIS Crime Form</i>		
<i>Project Name/Number:</i>	<i>/</i>		

Filing at a Glance

Company: Axis Insurance Company	SERFF Tr Num: REGU-125359796	State: Arkansas
Product Name: Axis FIS Crime Form	SERFF Status: Closed	State Tr Num: EFT \$50
TOI: 26.0 Burglary & Theft	Co Tr Num: AIC-AR-FIS-07 CR	State Status: Fees received
Sub-TOI: 26.0001 Commercial Burglary & Theft	Co Status:	Reviewer(s): Betty Montesi, Llyweyia Rawlins, Brittany Yielding
Filing Type: Form	Author: Jason Graciolett	Disposition Date: 11/19/2007
	Date Submitted: 11/14/2007	Disposition Status: Approved
Effective Date Requested (New): On Approval		Effective Date (New): 11/19/2007
Effective Date Requested (Renewal): On Approval		Effective Date (Renewal): 11/19/2007

General Information

Project Name:	Status of Filing in Domicile: Pending
Project Number:	Domicile Status Comments:
Reference Organization:	Reference Number:
Reference Title:	Advisory Org. Circular:
Filing Status Changed: 11/19/2007	
State Status Changed: 11/15/2007	Deemer Date:
Corresponding Filing Tracking Number:	
Filing Description:	

AXIS Insurance Company is submitting a new independent endorsement for use with its Commercial Crime Program. There is no overall rating impact anticipated from the use of this endorsement.

Attached is an explanatory memorandum which includes a description of the endorsement.

The following items are enclosed for your review:

1. State Required Filing Forms
2. Explanatory Memorandum

SERFF Tracking Number:	REGU-125359796	State:	Arkansas
Filing Company:	Axis Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AIC-AR-FIS-07 CR		
TOI:	26.0 Burglary & Theft	Sub-TOI:	26.0001 Commercial Burglary & Theft
Product Name:	Axis FIS Crime Form		
Project Name/Number:	/		

3. Independent Crime Form

Company and Contact

Filing Contact Information

(This filing was made by a third party - insuranceregulatoryconsultantsllc)

Jason Graciolett, Analyst	jasongraciolett@irccllc.com
50 Broad Street	(212) 571-3989 [Phone]
New York, NY 10004	() -[FAX]

Filing Company Information

Axis Insurance Company	CoCode: 37273	State of Domicile: Illinois
50 Broad Street	Group Code: 3416	Company Type:
Suite 501		
New York, NY 10004	Group Name:	State ID Number:
(212) 571-3989 ext. [Phone]	FEIN Number: 39-1338397	

Filing Fees

Fee Required?	Yes
Fee Amount:	\$50.00
Retaliatory?	No
Fee Explanation:	AR is \$50 per forms filing.
Per Company:	No

COMPANY	AMOUNT	DATE PROCESSED	TRANSACTION #
Axis Insurance Company	\$50.00	11/14/2007	16650348

SERFF Tracking Number: REGU-125359796
Filing Company: Axis Insurance Company
Company Tracking Number: AIC-AR-FIS-07 CR
TOI: 26.0 Burglary & Theft
Product Name: Axis FIS Crime Form
Project Name/Number: /

State: Arkansas
State Tracking Number: EFT \$50
Sub-TOI: 26.0001 Commercial Burglary & Theft

Correspondence Summary

Dispositions

Status	Created By	Created On	Date Submitted
Approved	Llyweyia Rawlins	11/19/2007	11/19/2007

SERFF Tracking Number: *REGU-125359796*
Filing Company: *Axis Insurance Company*
Company Tracking Number: *AIC-AR-FIS-07 CR*
TOI: *26.0 Burglary & Theft*
Product Name: *Axis FIS Crime Form*
Project Name/Number: /

State: *Arkansas*
State Tracking Number: *EFT \$50*
Sub-TOI: *26.0001 Commercial Burglary & Theft*

Disposition

Disposition Date: 11/19/2007
Effective Date (New): 11/19/2007
Effective Date (Renewal): 11/19/2007
Status: Approved
Comment:

Rate data does NOT apply to filing.

SERFF Tracking Number:	REGU-125359796	State:	Arkansas
Filing Company:	Axis Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AIC-AR-FIS-07 CR		
TOI:	26.0 Burglary & Theft	Sub-TOI:	26.0001 Commercial Burglary & Theft
Product Name:	Axis FIS Crime Form		
Project Name/Number:	/		

Item Type	Item Name	Item Status	Public Access
Supporting Document	Uniform Transmittal Document-Property & Casualty	Approved	Yes
Supporting Document	Filing Authorization	Approved	Yes
Supporting Document	Explanatory Memorandum	Approved	Yes
Form	AMEND DEFINITION OF EMPLOYMENT BENEFIT PLAN ENDORSEMENT	Approved	Yes

SERFF Tracking Number:	REGU-125359796	State:	Arkansas
Filing Company:	Axis Insurance Company	State Tracking Number:	EFT \$50
Company Tracking Number:	AIC-AR-FIS-07 CR		
TOI:	26.0 Burglary & Theft	Sub-TOI:	26.0001 Commercial Burglary & Theft
Product Name:	Axis FIS Crime Form		
Project Name/Number:	/		

Form Schedule

Review Status	Form Name	Form #	Edition Date	Form Type Action	Action Specific Data	Readability	Attachment
Approved	AMEND DEFINITION OF EMPLOYMENT BENEFIT PLAN ENDORSEMENT	CR 1001 (0607)	0607	Endorseme New nt/Amendm ent/Condi tions		0.00	CR 1001 0607 Amend Definition of Employment Benefit Plan.pdf

Endorsement No.

Effective date of this endorsement: 12:01 a.m. on_____

To be attached to and form part of Policy Number:_____

Issued to:_____

By:_____

AMEND DEFINITION OF EMPLOYMENT BENEFIT PLAN ENDORSEMENT

THIS ENDORSEMENT CHANGES THE POLICY. PLEASE READ IT CAREFULLY.

This endorsement modifies insurance provided under the following:

CRIME POLICY

In consideration of the premium charged, it is agreed that the term **Employment Benefit Plan** as defined in Section II. DEFINITIONS of this Policy, is amended to include the following:

<list plan(s)>

All other provisions remain unchanged.

Authorized Representative

Date

SERFF Tracking Number: *REGU-125359796*

State: *Arkansas*

Filing Company: *Axis Insurance Company*

State Tracking Number: *EFT \$50*

Company Tracking Number: *AIC-AR-FIS-07 CR*

TOI: *26.0 Burglary & Theft*

Sub-TOI: *26.0001 Commercial Burglary & Theft*

Product Name: *Axis FIS Crime Form*

Project Name/Number: */*

Rate Information

Rate data does NOT apply to filing.

SERFF Tracking Number: REGU-125359796
Filing Company: Axis Insurance Company
Company Tracking Number: AIC-AR-FIS-07 CR
TOI: 26.0 Burglary & Theft
Product Name: Axis FIS Crime Form
Project Name/Number: /

State: Arkansas
State Tracking Number: EFT \$50
Sub-TOI: 26.0001 Commercial Burglary & Theft

Supporting Document Schedules

		Review Status:	
Satisfied -Name:	Uniform Transmittal Document-Property & Casualty	Approved	11/19/2007

Comments:

Attachment:

AR - NAIC.pdf

		Review Status:	
Satisfied -Name:	Filing Authorization	Approved	11/19/2007

Comments:

Attachment:

1. Authorization Letter - Crime.pdf

		Review Status:	
Satisfied -Name:	Explanatory Memorandum	Approved	11/19/2007

Comments:

Attachment:

2. Explanatory Memo - CR.pdf

Property & Casualty Transmittal Document

1. Reserved for Insurance Dept. Use Only	2. Insurance Department Use only <table border="1" style="width: 100%; border-collapse: collapse;"> <tr><td style="width: 100%;">a. Date the filing is received:</td></tr> <tr><td>b. Analyst:</td></tr> <tr><td>c. Disposition:</td></tr> <tr><td>d. Date of disposition of the filing:</td></tr> <tr><td>e. Effective date of filing:</td></tr> <tr> <td style="width: 60%;">New Business</td> <td></td> </tr> <tr> <td>Renewal Business</td> <td></td> </tr> <tr><td>f. State Filing #:</td></tr> <tr><td>g. SERFF Filing #:</td></tr> <tr> <td>h. Subject Codes</td> <td></td> </tr> </table>	a. Date the filing is received:	b. Analyst:	c. Disposition:	d. Date of disposition of the filing:	e. Effective date of filing:	New Business		Renewal Business		f. State Filing #:	g. SERFF Filing #:	h. Subject Codes	
a. Date the filing is received:														
b. Analyst:														
c. Disposition:														
d. Date of disposition of the filing:														
e. Effective date of filing:														
New Business														
Renewal Business														
f. State Filing #:														
g. SERFF Filing #:														
h. Subject Codes														


3. Group Name	Group NAIC #
AXIS Capital Holdings	3416

4. Company Name(s)	Domicile	NAIC #	FEIN #	State #
Axis Insurance Company	IL	37273	39-1338397	

5. Company Tracking Number	AIC-AR-FIS-07 CR
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Contact Info of Filer(s) or Corporate Officer(s) [include toll-free number]

6. Name and address	Title	Telephone #s	FAX #	e-mail
Jason Graciolett - IRC, LLC 50 Broad Street, Suite 501 New York, NY 10004	Analyst	(212) 571-3989	(212) 571-2502	jasongraciolett@irccllc.com

7. Signature of authorized filer	
8. Please print name of authorized filer	Jason Graciolett

Filing information (see General Instructions for descriptions of these fields)

9. Type of Insurance (TOI)	26.0 - Burglary & Theft
10. Sub-Type of Insurance (Sub-TOI)	26.0001 Commercial Burglary & Theft
11. State Specific Product code(s) (if applicable)[See State Specific	
12. Company Program Title (Marketing title)	
13. Filing Type	<input type="checkbox"/> Rate/Loss Cost <input type="checkbox"/> Rules <input type="checkbox"/> Rates/Rules <input checked="" type="checkbox"/> Forms <input type="checkbox"/> Combination Rates/Rules/Forms <input type="checkbox"/> Withdrawal <input type="checkbox"/> Other (give description)
14. Effective Date(s) Requested	New: Upon Approval Renewal: Upon Approval
15. Reference Filing?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
16. Reference Organization (if applicable)	N/A
17. Reference Organization # & Title	N/A
18. Company's Date of Filing	November 14, 2007
19. Status of filing in domicile	<input type="checkbox"/> Not Filed <input checked="" type="checkbox"/> Pending <input type="checkbox"/> Authorized <input type="checkbox"/> Disapproved

Property & Casualty Transmittal Document—

20. This filing transmittal is part of Company Tracking # AIC-AR-FIS-07 CR

21. Filing Description [This area can be used in lieu of a cover letter or filing memorandum and is free-form text]

AXIS Insurance Company is submitting a new independent endorsement for use with its Commercial Crime Program. There is no overall rating impact anticipated from the use of this endorsement.

22. Filing Fees (Filer must provide check # and fee amount if applicable)
[If a state requires you to show how you calculated your filing fees, place that calculation below]

Check #: EFT
Amount: \$50.00

Refer to each state's checklist for additional state specific requirements or instructions on calculating fees.

*****Refer to the each state's checklist for additional state specific requirements (i.e. # of additional copies required, other state specific forms, etc.)**

FORM FILING SCHEDULE

(This form must be provided ONLY when making a filing that includes forms)

(Do not refer to the body of the filing for the forms listing, unless allowed by state.)

1.	This filing transmittal is part of Company Tracking #	AIC-AR-FIS-07 CR			
2.	This filing corresponds to rate/rule filing number (Company tracking number of rate/rule filing, if applicable)				
3.	Form Name /Description/Synopsis	Form # Include edition date	Replacement or Withdrawn?	If replacement, give form # it replaces	Previous state filing number, if required by state
01	Amend Definition of Employment Benefit Plan Endorsement	CR 1001 0607	<input checked="" type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
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			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		
			<input type="checkbox"/> New <input type="checkbox"/> Replacement <input type="checkbox"/> Withdrawn		



November 14, 2007

LETTER OF FILING AUTHORIZATION

I, Roseanna Kreis, am a duly authorized Filing and Regulatory Analyst of AXIS Insurance Company. This letter authorizes Insurance Regulatory Consultants, LLC (IRC) to file on behalf of AXIS Insurance Company multiple endorsements for our Crime program. This authorization extends to all correspondence and inquiries in connection with the Crime program filing.

Please direct all correspondence regarding this program to:

Insurance Regulatory Consultants, LLC (IRC)
50 Broad Street, Suite 501
New York, NY 10004

AXIS Insurance Company

Roseanna Kreis
Name

Regulatory Filings Analyst
Title

R Kreis
Signature

AXIS INSURANCE COMPANY
EXPLANATORY MEMORANDUM

Commercial Crime Endorsement

AXIS Insurance Company is submitting a new independent endorsement for use with its Commercial Crime Program. There is no overall rating impact anticipated from the use of these endorsements.

The enclosed forms are described below:

1. Form CR 1001 (Ed. 0607) - Amend Definition of Employment Benefit Plan Endorsement

Endorsement is used to schedule employee benefit plans pursuant to the form.